

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration OR Declaration Submitted after Initial Filing

Attorney Docket Number	BIE101USA
First Named Inventor	Biessener, et al.
COMPLETE IF KNOWN	
Application Number	09/258,413
Filing Date	02/26/99
Group Art Unit	2753
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTANTIALLY INSTANTANEOUS STORAGE RESTORATION FOR NON-COMPUTER FORENSICS APPLICATIONS

(Title of the Invention)

the specification of which

is attached hereto
OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

DECLARATION

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

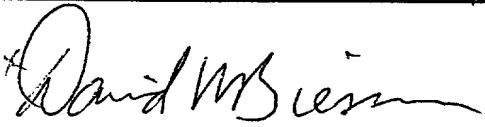
Name	Registration Number	Name	Registration Number
Joel D. Skinner, Jr. Marvin L. Beekman	33,786 38,377		

Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	Skinner and Associates		
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	David		Middle Initial	W.	Family Name	Biessener		Suffix e.g. Jr.	
Inventor's Signature						Date	15-17-99		
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Post Office Address									
City	Woodbury		State	MN	Zip	55125	Country	US	
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									

Please type a plus sign (+) inside this box

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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PTO/SB/01 (8-96)

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Joseph		Middle Initial	A.	Family Name	Frolik			Suffix e.g. Jr.	
Inventor's Signature						Date	5-17-99			
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor						
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Inventor's Signature						Date	5/17/99			
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature						Date				
Residence: City			State		Country				Citizenship	
Post Office Address										
Post Office Address										
City			State		Zip		Country			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature						Date				
Residence: City			State		Country				Citizenship	
Post Office Address										
Post Office Address										
City			State		Zip		Country			
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto										